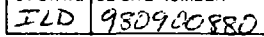




327886

<b>EPA</b> 0316005598		<b>POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT</b>		<b>I. IDENTIFICATION</b>	
		<b>PART 1 - SITE INFORMATION AND ASSESSMENT</b>		01 STATE 02 SITE NUMBER <b>ILD 980900880</b>	
<b>II. SITE NAME AND LOCATION</b>					
01 SITE NAME (Legal, common, or descriptive name of site)			02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER		
<b>Great Lakes Limited Partnership (SIA)</b>			<b>505 N. Lakeshore Dr. Suite 606</b>		
03 CITY		04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE
<b>Chicago</b>		<b>IL</b>	<b>60611</b>	<b>Cook</b>	<b>031 IL-01</b>
09 COORDINATES LATITUDE		LONGITUDE			
10 DIRECTIONS TO SITE (Starting from nearest public road)					
<b>UNKNOWN</b>					
<b>III. RESPONSIBLE PARTIES</b>					
01 OWNER (If known)			02 STREET (Business, mailing, residential)		
03 CITY		04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER	
				( )	
07 OPERATOR (If known and different from owner)			08 STREET (Business, mailing, residential)		
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
				( )	
13 TYPE OF OWNERSHIP (Check one)					
<input type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL					
<input type="checkbox"/> F. OTHER: _____ (Specify) <input checked="" type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)					
<input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input checked="" type="checkbox"/> C. NONE					
<b>IV. CHARACTERIZATION OF POTENTIAL HAZARD</b>					
01 ON SITE INSPECTION		BY (Check all that apply)			
<input type="checkbox"/> YES DATE ____/____/____ MONTH DAY YEAR <input checked="" type="checkbox"/> NO		<input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)			
		CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one)		03 YEARS OF OPERATION			
<input type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input checked="" type="checkbox"/> C. UNKNOWN		BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED					
<b>UNKNOWN</b>					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION					
<b>UNKNOWN</b>					
<b>V. PRIORITY ASSESSMENT</b>					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)					
<input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
<b>VI. INFORMATION AVAILABLE FROM</b>					
01 CONTACT		02 OF (Agency/Organization)		03 TELEPHONE NUMBER	
				( )	
04 PERSON RESPONSIBLE FOR ASSESSMENT		05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBER	08 DATE
<b>Gregory W. Dunn</b>		<b>IEPA</b>	<b>RPMS</b>	<b>(217) 782-6761</b>	<b>09/10/87</b> MONTH DAY YEAR



I HIGHLY VOLATILE  
J EXPLOSIVE  
K REACTIVE  
L INCOMPATIBLE  
M NOT APPLICABLE



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
IL D 930900880

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ B SURFACE WATER CONTAMINATION  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ C CONTAMINATION OF AIR  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ D FIRE/EXPLOSIVE CONDITIONS  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ E DIRECT CONTACT  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ F CONTAMINATION OF SOIL  
03 AREA POTENTIALLY AFFECTED \_\_\_\_\_  
(Acres)

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ G DRINKING WATER CONTAMINATION  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ H WORKER EXPOSURE/INJURY  
03 WORKERS POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ I POPULATION EXPOSURE/INJURY  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE \_\_\_\_\_ )  
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE

02 SITE NUMBER

FLD

980 900 880

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills runoff standing liquids leaking drums)  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

IV. COMMENTS

All attempts to locate a phone number  
for this company ended with no information.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)



## ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

MEMORANDUM

DATE:

September 9, 1987

TO:

Don Josif, USEPA

FROM:

Gregory W. Dunn *GWD*

SUBJECT:

L0316005598 -- Cook County  
Chicago/Great Lakes Limited Partnership (SIA)  
ILD 980900880  
Superfund/HRS

RECEIVED

SEP 18 1987

Program  
Support Section

## Executive Summary

This particular site has been placed on the Comprehensive Emergency Response Compensation and Liability Act Information System (CERCLIS), as a result of its identification during the federally funded Surface Impoundment Assessment study of 1980. In this instance, the owners name and business address were erroneously identified as the location of the surface impoundment.

An extensive review of Agency files and numerous phone calls to different State agencies, has revealed no information on the location of any surface impoundments owned by this Partnership. Until such time that more information is obtained to complete the PA form, a no further action is recommended.

GWD:kh/x-2

RECEIVED

SEP 18 1987

Pre-Remedial  
Unit

#00392